BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

10/562292

APPLICANT(S)

FILING DATE

FILING DATE

	CI ANG										Parallel Second			
1	ASE	ILED	AFTER AFTER				CLAIM	S				/POW		to lot
j	IND. DEP.		I AMENDMENT		AT LER 1 MAMENDMENT		1		ACE		1.00		300-8421	
			IND. DEP.			_			AS FILED		AFTER 1"AMENDMENT		AFTER	
1	/			DEI.	IND.	DEP.			IND.	DEP.			2 HAME	NOMEN
2	-	1				ļ		51		DEI.	IND.	DEP.	IND.	DE
3	- 			/				52						
5	 	2						53						
6	 	-				-		54						
7	1	-		4			ŀ	55						
8	 	2					ŀ	56 57						
9		0		4			F	58						
10		Z					1	59						
		7		/ 			<u> </u>	60						
12		1		7 				61						
13		0		'/ 				62						
14 15		0		ナー				63						
16						 	-	64 .						
17							 -	65						
18							 -	66 67						
19							-	68		$-\mathbf{I}$				
20			-				-	69						
21								70						
22								71						
23								72						
25			·				<u> </u>	73						
26							<u> </u>	74 75						
27							1-	76						
28			 		_		1	77						
29				-				78						
30								79 .						
$\frac{31}{32}$								80						
33		-					 	81 82						
34								33						
35				_				34						
36					_			5			- <u>-</u> -			_
37								6		$\overline{}$				
38								7			 			
39 40								8						
41							8							\dashv
42							9							
43							9							\dashv
44]	9							\Box
45		_					9.					-		
46							9							
47						-	90					-		_
48							9					1		
50	··					7	98							\dashv
		, 					10							\dashv
TAL IND.	1	- /	1	- 1	1		TOTAL				_			
TAL DEP	*	13	_			1	}		_ \$		_ \$	1	1	
TOTAL CLAIMS				(PD)	- Investor		TOTAL	DEP	4 2	1		1		-
	EC. 20			鷂			TOTA			2 E			4	
PTO - 1360 (1273	LIMO	/					CLAB	<u>- ا </u>		E	機器	\$ 1	表 效	331

PTO - 1360 CREST TIMES

U.S. DEPARTMENT OF COMMERCE